

Application for a License to Conduct a Temporary: (check only one)**Instruction:**

1. Complete the applicable section. (Make any corrections if necessary.)

2. Sign and date the application.

3. Make a check or money order payable to: **Toledo-Lucas County Health Department**4. Return check and signed application to: **Toledo-Lucas County Health Department****635 N. Erie Street, Room #352****Toledo, OH 43604**☐ **Food Service Operation**☐ **Retail Food Establishment**

Before the license application can be processed the application must be completed and the indicated fee submitted.

Failure to complete this application and remit the proper fee will result in not issuing a license. This action is governed by Chapter 3717 of the Ohio Revised Code.

Name of Temporary food facility:		
Location of event:		
Address of event		
City	State	Zip
Start date: / /	End date: / /	Operation time(s): to
Name of license holder:		Phone number:
Address of License holder		
City	State	Zip
List all foods being served/sold 		

I herby certify that I am the license holder, or the authorized representative, of the temporary food service operation or temporary retail food establishment indicated above:

Signature	Date
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Licenser to complete below

Valid date(s):	License fee:
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Application approved for license as required by Chapter 3717 of the Ohio Revised Code.

By	Date
Audit no.	License no.

OFFICE USE ONLY	
DATE LICENSE APPLIED FOR AT HEALTH DEPT: _____	
DATE APPLICATION RECEIVED VIA MAIL OR FAX: _____	
COMMERCIAL EVENT:	YES _____ NO _____
NON-COMMERCIAL EVENT	YES _____ NO _____
If Yes, a copy of the 501(C)(3) is required at time of application to pay the non-commercial fee.	
SANITARIAN DISTRICT #: _____	
INITIALS OF PERSON WHO RECEIVED PAPERWORK: _____	

TEMPORARY FOOD SERVICE/FOOD ESTABLISHMENT WORKSHEET

FESTIVAL/EVENT INFO

FESTIVAL/EVENT NAME: _____

EVENT LOCATION: _____

EVENT ADDRESS: _____

START DATE: _____

STOP DATE: _____

(Maximum 5 Day Temporary License)

OPERATOR INFO

NAME: _____

DATE OF BIRTH: _____

STREET ADDRESS: _____

CITY, STATE ZIP: _____

TELEPHONE# HOME: _____

TELEPHONE# CELL: _____

***** P.O. BOX # ADDRESSES WILL NOT BE ACCEPTED*****

The Toledo-Lucas County Health Department requires that you apply for a Temporary Food license at least 3 days before the event begins. Be advised, failure to apply in a timely fashion can result in a delay of the issuing of your Temporary Food license.

PERSON-IN-CHARGE

You must designate a Person-in-Charge who is knowledgeable about proper and safe food handling practices and can answer questions correctly regarding food safety as asked by your Inspector.

A Person-in-Charge must be present at the Temporary Food Service at all times.

LIST THE NAME(S) OF THE PERSON-IN-CHARGE AT YOUR SITE.

☐

☐

☐

☐

What time will you start setting up? _____ What time will you start serving? _____

What are the hours you will be operating each day of the event? _____

YOU MUST HAVE A METAL STEM THERMOMETER BEFORE LICENSING

Check off which style you have:

- ☐ Digital Thermometer 0°F to 220°F
- ☐ Dial-Face Thermometer 0°F to 220°F



YOU MUST HAVE A HANDWASH STATION

HANDWASH STATION MUST BE SET-UP BEFORE FOOD PREPARATION STARTS

You must have warm water, soap, paper towels at your Handwash Station

Check off what you will provide:

- ☐ Insulated Thermos-Style Container with Free-Flowing Spout
- ☐ Portable Handsink, Provide Make & Model #: _____

Providing Hand Sanitizer to use after hand washing is recommended.

YOU MUST HAVE A DISHWASH STATION.

DISHWASH STATION MUST BE SET-UP BEFORE FOOD PREPARATION STARTS

You must provide three containers large enough to immerse your dishes & utensils.

Check off which type of containers you will provide:

- ☐ Dishpans
- ☐ Buckets
- ☐ Other, Please describe in detail: _____



The use of disposable dishes & utensils is recommended whenever possible.

YOU MUST PROVIDE DISH SOAP & SANITIZER FOR THE DISHWASH STATION

Check off which chemical Sanitizer you will provide:

- ☐ Plain Chlorine Bleach
- ☐ Quat Ammonia liquid
- ☐ Sanitabs
- ☐ Other, Please describe in detail: _____



YOU MUST PROVIDE SANITIZER TEST PAPERS TO CHECK SANITIZER STRENGTH

Check off which Sanitizer Test Paper you will provide:

- ☐ Chlorine Test Papers are for Plain Chlorine Bleach
- ☐ pHydrion QT-10 Test Papers are for Quat Ammonia liquid and Sanitabs



YOU MUST PROVIDE HAIR COVERING FOR ALL FOOD EMPLOYEES

Check off which Hair Covering the employees will be wearing:

- ☐ Hats
- ☐ Hairnets
- ☐ Other, Please describe in detail: _____

NO BARE HAND CONTACT IS ALLOWED ON READY-TO-EAT & COOKED FOODS

Check off what items you will provide to accomplish this:

- ☐ Single-Use disposable gloves
- ☐ Tongs, Spoons, Utensils
- ☐ Deli Tissue
- ☐ Other, Please describe in detail: _____



FOOD MENU



ALL FOODS SERVED MUST BE LISTED HERE

NO HOME-COOKED FOODS ALLOWED!!!

ALL FOOD TO BE FROM AN APPROVED, LICENSED SOURCE

PREP & COOKING OF FOODS MUST BE DONE AT YOUR LICENSED SITE

MEATS, FISH	WHERE PURCHASED?		HOT SIDE DISHES	WHERE PURCHASED?

COLD SIDE DISHES	WHERE PURCHASED?		BAKED GOODS BREAD, DESSERT	WHERE PURCHASED?

HOT & COLD BEVERAGES	WHERE PURCHASED?



TEMPERATURE CONTROL

HOT FOOD



**ALL COOKING & HOT HOLDING EQUIPMENT
MUST BE APPROVED BY THE TOLEDO-LUCAS COUNTY HEALTH DEPARTMENT**
List all cooking and hot holding equipment you will be bringing to your temporary food set-up

CHAFERS WITH STERNOS ARE NOT PERMITTED!!!

TYPE OF EQUIPMENT	DESCRIBE HOT FOOD THAT WILL BE IN THE LISTED EQUIPMENT
<i>Example...</i> Electric roaster pan	<i>Example...</i> Cooked Peas & Carrots

COLD FOOD

YOU MUST KEEP ALL COLD FOODS AT 41°F OR LESS

Check off what kind of cold holding you will be providing:

- ☐ Coolers with Ice, You must list below how many coolers you will bring.
☐ Ice Supplier? Provide Name & Address: _____

**Raw Meats must be held in separate coolers by species
Ready-to Eat Foods must be held in separate coolers from raw meats**

STYROFOAM COOLERS ARE NOT PERMITTED!!!



TYPE OF COOLER	WHAT IS IN THE COOLER?
<i>Example...</i> Igloo Cooler	<i>Example...</i> Raw Salmon
1	
2	
3	
4	
5	
6	
7	
8	



- ☐ Electric Refrigeration Unit, Provide Make & Model #: _____

WARM WATER IS REQUIRED FOR HANDWASHING AND DISHWASHING

Check off how you will provide a continuous supply of warm water for your Temporary Site:

- ☐ Electric Coffee Maker
- ☐ Provided by Festival/Event Organization
- ☐ Other, Please describe in detail: _____

CLEAN WATER IS REQUIRED FOR DISHWASHING

Check off how you will provide clean water for your Temporary Site:

- ☐ Water will brought to the site in clean food grade containers.
- ☐ Provided by Festival/Event Organization
- NOTE: Hoses used for water supply must be food grade (e.g.: RV/Marine hose)*
- ☐ Other, Please describe in detail: _____

YOU MUST MAINTAIN COLD FOOD AT 41°F OR LESS & HOT FOOD FROM A LICENSED FOOD SERVICE AT 135°F OR GREATER DURING TRANSPORTATION TO YOUR TEMPORARY SITE

Check how you will transport cold & hot (if applicable) foods to your site:

- ☐ Coolers with ice
- ☐ Cambros, List licensed facility food is coming from: _____
- ☐ Other, Please describe in detail: _____

TEMPORARY FOOD STANDS MAY NOT SET UP ON GRASS, DIRT OR GRAVEL.

Check off what type of flooring you will be setting up on:

- ☐ Asphalt (parking lot)
- ☐ Concrete
- ☐ Plywood
- ☐ Other, Please describe in detail: _____

ALL FOOD AND SINGLE SERVICE ITEMS (PLATES, NAPKINS, ETC.) MUST BE STORED AT LEAST 6 INCHES UP OFF THE GROUND.

NOTE: ICED COOLERS MAY BE STORED ON THE GROUND

Please describe in detail how you will keep product at least 6 inches up off the ground.

FOOD MUST BE PROTECTED FROM CONTAMINATION BY THE PUBLIC

Check off how you will keep your food items protected:

- ☐ Keep foods on a table behind the table customers will be served from
- ☐ Cover foods with lids, foil or wrap
- ☐ Pre-Portion foods
- ☐ Sneeze Guard
- ☐ Other, Please describe in detail: _____

ALL TRASH MUST BE REMOVED FROM THE TEMPORARY SITE AT END OF EACH DAY

Check off how you will dispose of your trash:

- ☐ Picked up by Festival/Event Organization
- ☐ Dumpster on Site
- ☐ Taken away by applicant and disposed of properly

DRAW A DIAGRAM SHOWING HOW YOUR TEMPORARY FOOD SERVICE OR FOOD ESTABLISHMENT WILL BE SET-UP FOR OPERATION.

- ☐ Show location of your Sanitation Table with Handwash and Dishwash Set-up.
- ☐ Show location & label ALL tables
- ☐ Show location & label ALL cooking equipment.
- ☐ Show location & how many iced coolers you will have.
- ☐ Show location & label ALL hot-holding equipment
- ☐ Show location of storage of serving containers and utensils
- ☐ Indicate on diagram where you will be serving the food to the public

THE DIAGRAM MUST BE NEATLY DRAWN & ACCURATE TO BE APPROVED

I agree to follow all of the above listed items while licensed by the Toledo-Lucas County Health Department to operate a Temporary Food Service/Food Establishment

Signature of Applicant:_____

**SUBMIT THE FOLLOWING ITEMS
FOR THE TEMPORARY LICENSE APPROVAL PROCESS TO BEGIN:**

- ☐ Completed & Signed Temporary Food Service/Food Establishment Worksheet
- ☐ Completed & Signed Temporary Application
- ☐ Check or Money Order for payment of the Temporary License fee:

72.00 for Commercial

36.00 for Non-Profit with proper documentation

- ☐ Mail to: Toledo-Lucas County Health Department
635 N. Erie Street
Room # 352
Toledo, Ohio 43604
- ☐ Questions? Call 419.213.4100 Environmental Health, Option 3